Women's Health Connection Program Compensation and Billing - Covered Services Fee for Service Schedule – Effective June 30, 2007

Listed below are allowable procedures and the corresponding suggested Current Procedural Terminology codes for use in the Women's Health Connection Program, which is funded by the National Breast and Cervical Cancer Early Detection Program. These codes are subject to the following general conditions:

- An office visit should include performance of a clinical breast exam, a pelvic exam, and a Pap smear¹. For clients 50 or older, it should also include a mammogram referral.
- A full office visit will not be reimbursed if all eligible services were not provided.
- Some procedures not listed may be authorized on a case-by-case basis if they relate to a diagnostic work-up. For questions about such procedures, contact the appropriate case manager in the Las Vegas Office at (702) 486-6260.

	OFFICE VISITS		
99201	New Patient; history, exam, straightforward decision-making; 10 minutes	\$36.60	
99202	New Patient; <i>expanded</i> history, exam, straightforward decision-making; 20 minutes	\$63.70	
99203	New Patient; <i>detailed</i> history, exam, straightforward decision-making; 30 minutes	\$94.33	
99211	Established Patient; evaluation and management, may not require presence of physician; 5 minutes	\$20.75	
99212	Established Patient; history, exam, straightforward decision-making; 10 minutes	\$37.78	
99213	Established Patient; <i>expanded</i> history, exam, straightforward decision-making; 15 minutes	\$60.86	
99241	Office Consultation; history, exam, straightforward decision-making; 15 minutes	\$49.78	
99242	Office Consultation; <i>expanded</i> history, exam, straightforward decision-making; 30 minutes	\$91.56	
99243	Office Consultation; <i>detailed</i> history, exam, decision-making of low complexity; 40 minutes	\$125.25	
99386	Initial Preventive Medicine Evaluation/New Patient (20 min)	\$63.70	
99387	Initial Preventive Medicine Evaluation/New Patient (30 min)	\$94.33	
99396	Periodic Preventive Medicine Evaluation/Established Patient (20 min)	\$37.78	
99397	Periodic Preventive Medicine Evaluation/Established patient (30 min)	\$60.86	

Revised: July 24, 2007

¹ The Women's Health Connection Program has a new Pap testing policy. Depending on the client's prior history, it may not be necessary to perform a Pap test during every annual visit. For more information on when it is appropriate to conduct a Pap test, please review the document titled "Pap Test Screening Schedules, 2007 and 2008," which is on the Program's website at http://health.nv.gov (select the Bureau of Community Health link and then the Women's Health Connection link).

	BREAST SCREENING & DIAGNOSTIC PROCEDURES	
77057	Screening Mammogram, Bilateral (2 view study of each breast) (Global)	\$84.56
77057-TC	Screening Mammogram, Bilateral (2 view study of each breast) (Technical)	\$50.70
77057-26	Screening Mammogram, Bilateral (2 view study of each breast) (Professional)	\$33.85
77055	Diagnostic Mammogram, Follow-up, Unilateral (Global)	\$80.60
77055-TC	Diagnostic Mammogram, Follow-up, Unilateral (Technical)	\$46.74
77055-26	Diagnostic Mammogram, Follow-up, Unilateral (Professional)	\$33.85
77056	Diagnostic Mammogram, Follow-up, Bilateral (Global)	\$100.56
77056-TC	Diagnostic Mammogram, Follow-up, Bilateral (Technical)	\$58.63
77056-26	Diagnostic Mammogram, Follow-up, Bilateral (Professional)	\$41.93
G0202	Digital Screening Mammogram ² , Bilateral (Global)	\$84.56
G0202-TC	Digital Screening Mammogram ² , Bilateral (Technical)	\$50.70
G0202-26	Digital Screening Mammogram ² , Bilateral (Professional)	\$33.85
G0204	Digital Diagnostic Mammogram ² , Bilateral (Global)	\$100.56
G0204-TC	Digital Diagnostic Mammogram ² , Bilateral (Technical)	\$58.63
G0204-26	Digital Diagnostic Mammogram ² , Bilateral (Professional)	\$41.93
G0206	Digital Diagnostic Mammogram ² , Unilateral (Global)	\$80.60
G0206-TC	Digital Diagnostic Mammogram ² , Unilateral (Technical)	\$46.74
G0206-26	Digital Diagnostic Mammogram ² , Unilateral (Professional)	\$33.85
77031	Stereotactic localization guidance for breast biopsy or needle placement	\$317.80
77031-TC	(Global) Stereotactic localization guidance for breast biopsy or needle placement (Technical)	\$240.06
77031-26	Stereotactic localization guidance for breast biopsy or needle placement (Professional)	\$77.74
77032	Mammographic guidance for needle placement, breast (Global)	\$72.49
77032-TC	Mammographic guidance for needle placement, breast (Technical)	\$45.56
77032-16	Mammographic guidance for needle placement, breast (Professional)	\$26.93
76098	Radiological examination, surgical specimen (Global)	\$23.54
76098-TC	Radiological examination, surgical specimen (Technical)	\$15.84
76098-26	Radiological examination, surgical specimen (Professional)	\$7.70
88104	Cytopathology, Smears, (Breast Discharge only) smears with interpretation (Global)	\$57.43
88104-TC	Cytopathology, Smears, (Breast Discharge only) smears with interpretation (Technical)	\$28.91
88104-26	Cytopathology, Smears, (Breast Discharge only) smears with interpretation (Professional)	\$28.51
88106	Cytopathology, Smears, (Breast Discharge only) filter method only with interpretation (Global)	\$75.65
88106-TC	Cytopathology, Smears, (Breast Discharge only) filter method only with interpretation (Technical)	\$47.13
88106-26	Cytopathology, Smears, (Breast Discharge only) filter method only with interpretation (Professional)	\$28.51
88107	Cytopathology, Smears, (Breast Discharge only) smears and filter preparation with interpretation (Global)	\$93.58

 $^{^{2}}$ Digital mammography is approved for reimbursement at the conventional film rate only.

Revised: July 24, 2007

BREAST SCREENING & DIAGNOSTIC PROCEDURES		
88107-TC	Cytopathology, Smears, (Breast Discharge only) smears and filter	\$54.26
	preparation with interpretation (Technical)	
88107-26	Cytopathology, Smears, (Breast Discharge only) smears and filter	\$39.32
	preparation with interpretation (Professional)	
88108	Cytopathology, concentration technique, smears and interpretation	\$70.89
	(Breast Discharge only)(e.g., Saccomanno Technique) (Global)	
88108-TC	Cytopathology, concentration technique, smears and interpretation	\$42.38
	(Breast Discharge only)(e.g., Saccomanno Technique) (Technical)	
88108-26	Cytopathology, concentration technique, smears and interpretation	\$28.51
	(Breast Discharge only)(e.g., Saccomanno Technique) (Professional)	
76645	Ultrasound, breast(s), unilateral or bilateral, B-scan and/or real time	\$77.65
	with image documentation (Global)	
76645-TC	Ultrasound, breast(s), unilateral or bilateral, B-scan and/or real time	\$51.50
	with image documentation (Technical)	
76645-26	Ultrasound, breast(s), unilateral or bilateral, B-scan and/or real time	\$26.15
7.00.10	with image documentation (Professional)	** ** ** ** ** ** ** **
76942	Ultrasonic guidance for needle placement, imaging supervision and	\$163.82
5 (0.40 FG	interpretation (Global)	#101 10
76942-TC	Ultrasonic guidance for needle placement, imaging supervision and	\$131.10
76040.06	interpretation (Technical)	Ф22.71
76942-26	Ultrasonic guidance for needle placement, imaging supervision and	\$32.71
10000	interpretation (Professional)	Φ100 00
19000	Puncture aspiration of cyst of breast	\$108.90
19001	Puncture aspiration of cyst of breast, each additional cyst (Used with 19000)	\$25.94
19100	Breast biopsy, percutaneous, needle core, not using imaging guidance	\$131.68
19101	Breast biopsy, open, incisional	\$301.22
19102	Breast biopsy, percutaneous, needle core, using imaging guidance; for	\$219.73
10102	placement of localization clip use 19125	
19103	Breast biopsy, percutaneous, automated vacuum assisted or rotating	\$574.16
10100	biopsy device, using imaging guidance	0.410.55
19120	Excision of cyst, fibroadenoma or other benign or malignant tumor,	\$413.55
	aberrant breast tissue, duct lesion, nipple or areolar lesion; open; one or	
10125	more lesions	¢454.07
19125	Excision of breast lesion identified by preoperative placement of	\$454.07
10126	radiological marker; open; single lesion	¢152.70
19126	Excision of breast lesion identified by preoperative placement of	\$152.70
	radiological marker, open; each additional lesion separately identified	
10200	by a preoperative radiological marker Properative placement of needle legalization wire breest	¢157.40
19290	Preoperative placement of needle localization wire, breast	\$157.40
19291	Preoperative placement of needle localization wire, breast; each additional lesion	\$69.59
19295	Image guided placement, metallic localization clip, percutaneous, during	\$102.18
19293		\$102.18
10021	breast biopsy Fine needle against ion without imaging guidence	\$122 DE
10021	Fine needle aspiration without imaging guidance	\$132.06
	Fine needle aspiration with imaging guidance	\$141.96
88172	Cytopathology, evaluation of fine needle aspirate; immediate	\$52.22
	cytohistologic study to determine adequacy of specimen(s) (Global)	

Revised: July 24, 2007

BREAST SCREENING & DIAGNOSTIC PROCEDURES		
88172-TC	Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy of specimen(s) (Technical)	\$21.39
88172-26	Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy of specimen(s) (Professional)	\$30.83
88173	Cytopathology, evaluation of fine needle aspirate; <i>interpretation and report</i> (Global)	\$136.63
88173-TC	Cytopathology, evaluation of fine needle aspirate; <i>interpretation and report</i> (Technical)	\$65.74
88173-26	Cytopathology, evaluation of fine needle aspirate; <i>interpretation and report</i> (Professional)	\$70.89
88305	Surgical pathology, gross and microscopic examination (Global)	\$106.27
88305-TC	Surgical pathology, gross and microscopic examination (Technical)	\$67.73
88305-26	Surgical pathology, gross and microscopic examination (Professional)	\$38.54
88307	Surgical pathology, gross and microscopic examination; requiring microscopic evaluation of surgical margins (Global)	\$196.95
88307-TC	Surgical pathology, gross and microscopic examination; requiring microscopic evaluation of surgical margins (Technical)	\$115.26
88307-26	Surgical pathology, gross and microscopic examination; requiring microscopic evaluation of surgical margins (Professional)	\$81.69
88331	Pathology consultation during surgery, first tissue block, with frozen section(s), single specimen (Global)	\$89.00
88331-TC	Pathology consultation during surgery, first tissue block, with frozen section(s), single specimen (Technical)	\$27.73
88331-26	Pathology consultation during surgery, first tissue block, with frozen section(s), single specimen (Professional)	\$61.27
A4550	Surgical supplies and materials provided by the physician over and above those usually included with the office visit or other services rendered (trays, supplies, or materials provided)	\$19.99

CERVICAL SCREENING & DIAGNOSTIC PROCEDURES		
88164	Cytopathology (conventional Pap test), slides cervical or vaginal reported in Bethesda System, manual screening under physician supervision	\$14.76
88141	Cytopathology (conventional Pap test), cervical or vaginal, any reporting system, requiring interpretation by physician	\$23.56
88142	Cytopathology (liquid-based Pap test) cervical or vaginal, collected in preservative fluid, automated thin layer preparation; manual screening under physician supervision	\$28.31
88143	Cytopathology, cervical or vaginal, collected in preservative fluid, automated thin layer preparation; manual screening and rescreening under physician supervision	\$28.31
88174	Cytopathology, cervical or vaginal, collected in preservative fluid, automated thin layer preparation; screening by automated system, under physician supervision	\$28.31
88175	Cytopathology, cervical or vaginal, collected in preservative fluid, automated thin layer preparation; screening by automated system and manual rescreening, under physician supervision	\$28.31
87621	Hybrid Capture II from Digene - HPV Test (High Risk Typing, only)	\$49.04

Revised: July 24, 2007 4

	CERVICAL SCREENING & DIAGNOSTIC PROCEDURES	
57452	Colposcopy of the cervix	\$107.98
57454	Colposcopy of the cervix, with biopsy and endocervical curettage	\$153.54
57455	Colposcopy of the cervix, with biopsy	\$143.33
57456	Colposcopy of the cervix, with endocervical curettage	\$135.22
57460	Endoscopy with loop electrode biopsy(s) of the cervix ³	\$326.29
57461	Endoscopy with loop electrode conization of the cervix ³	\$359.52
57500	Biopsy, single or multiple, or local excision of lesion, with or without fulguration (separate procedure)	\$140.87
57505	Endocervical curettage (not done as part of a dilation and curettage)	\$101.34
57520	Conization of cervix, with or without fulguration, with or without dilation and curettage, with or without repair; cold knife or laser ³	\$308.33
57522	Loop electrode excision procedure ³	\$261.02
58100	Endometrial sampling (biopsy) with or without endocervical sampling (biopsy), without cervical dilation, any method (separate procedure)	\$109.91
88305	Surgical pathology, gross and microscopic examination	\$106.27
88305-TC	Surgical pathology, gross and microscopic examination (Technical)	\$67.73
88305-26	Surgical pathology, gross and microscopic examination (Professional)	\$38.54
88331	Pathology consultation during surgery, first tissue block, with frozen section(s), single specimen (Global)	\$89.00
88331-TC	Pathology consultation during surgery, first tissue block, with frozen section(s), single specimen (Technical)	\$27.73
88331-26	Pathology consultation during surgery, first tissue block, with frozen section(s), single specimen (Professional)	\$61.27
88332	Pathology consultation during surgery, first tissue block, with frozen section(s), each additional specimen	\$39.95
A4550	Surgical supplies and materials provided by the physician over and above those usually included with the office visit or other services rendered (trays, supplies, or materials provided)	\$19.99

OTHER PROCEDURES ANESTHESIA		
		00400
	Minimum Service: Three Units = $(\$17.76 \times 3) = \53.28	
	Thereafter services payable by increments of 15	
	minutes/\$17.76/Unit	
	Rate: \$17.76+Increments in excess of 3 units	
	AMBULATORY SURGERY CENTER	
Group 3	(19120, 19125 & 19126), including preoperative, supply and medication	\$567.97

	PROCEDURES SPECIFICALLY NOT ALLOWED	
Any	Treatment of breast cancer, cervical intraepithelial neoplasia and cervical cancer.	
Any	HPV testing for screening purposes	
Any	Computer Aided Detection (CAD) in breast cancer screening or diagnostics	

CPT codes, descriptions and other data only are copyright 2001 American Medical Association.

All Rights Reserved (or such other date of publication of CPT).

CPT is a trademark of the American Medical Association.

Revised: July 24, 2007 5

_

³ Prior authorization is required before the code will be paid.